

ADDENDUM

Position Title: Department:	Class Code:	Position Level:
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ADDITIONAL KEY RESPONSIBILITIES
1. 2. 3. 4. 5.

APPROVALS
<i>Department Head:</i> Name: _____ Signature: _____ Date: _____ <i>Division Director:</i> Name: _____ Signature: _____ Date: _____ <i>County Administrator:</i> Name: _____ Signature: _____ Date: _____

On this date I have received a copy of my job description relating to my employment with Monroe County.

Name: _____ Signature: _____ Date: _____